

EMZ  
10/20/00  
11/3/00

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	717		8-31-00
O.I.P.E. CLASSIFIER	EW	32	9/7
FORMALITY REVIEW	ALB	901	10/12/00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions,  
 staple additional sheet here

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